1222175

SEC Potential persons who are to respond to the collection of information 1972 (6-02) Contained in this form are not required to respond unless the form displays a currently valid OMB control number.

© 5 2003

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption state exemption unless such exemption is predicated on the filing of a federal notice.

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0076

Expires: May 31, 2005

Estimated average burden hours per response...1

FORM D



NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY					
Prefix	Serial				
DATE RECEIVED					

MAR 1 1 2003

THOMSON FINANCIAL

Name of Offering ([] check if this is an amendment and name has changed, and indicate change.) Class C Membership Interests of Corinthian Holdings L.L.C.

Filing Under (Check box(es) that apply): [] Rule 504 [] Rule 505 [X] Rule 506 [] Section 4(6) [] ULOE

Type of Filing: [X] New Filing [] Amendment

A. BASIC IDENTIFICATION DATA

^{1.} Enter the information requested about the issuer

Name of Issuer ([] change.) Corinthian Ho	eck if this is an amendment and nam Idings L.L.C.	e has changed, and	d indiciate		
Address of Executive C		, State, Zip Code)			
Telephone Number (Including Area Code) 10 East 53 rd Street, 22 nd Floor New York, New York 10022 (212) 287-1500					
Address of Principal Bu Telephone Number (Ind (if different from Execut		reet, City, State, Zip	Code)		
Brief Description of Bus	siness Managing Member of broker-	dealer and advisory	r firm		
Type of Business Organization					
[] corporation	[] limited partnership, already formed	[X] other (pleading)	ase specify): Lir	mited	
[] business trust	[] limited partnership, to be formed				
		Month Year			
	te of Incorporation or Organization: ation or Organization: (Enter two-lette CN for Canada; FN		ce abbreviation		

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in

Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	[] Promoter [X] Beneficial Owner	[] Executive Officer	[X] Director []	General and/or Managing Partner
Full Name (Last nam	ne first, if individ	ual) Manoff, Mi	tchell		
Business or Resider 22 nd Floor, New York		mber and Stree	et, City, State, Zip Cod	e) 10 East 53 rd S	Street,
Check Box(es) that Apply:	[] Promoter [[X] Beneficial Owner	[] Executive Officer	[X] Director []	General and/or Managing Partner
Full Name (Last nam	ne first, if individ	ual) Calabrese	, Richard	* * * * * * * * * * * * * * * * * * * *	······································
Business or Resider 22 nd Floor, New Yorl		mber and Stree	et, City, State, Zip Cod	e) 10 East 53 rd S	treet,
Check Box(es) that Apply:	[] Promoter	Beneficial Owner	[] Executive Officer	[] Director [X]	General and/or Managing Partner

Business or Residen 22 nd Floor, New York	ce Address (Number and Street, NY 10022	et, City, State, Zip Coc	le) 10 East 53 rd St	reet,
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[X] Executive Officer	[] Director []	General and/or Managing Partner
Full Name (Last nam	ne first, if individual) Greenberg	, William		· · · · · · · · · · · · · · · · · · ·
Business or Residen 22 nd Floor, New York	ce Address (Number and Street, NY 10022	et, City, State, Zip Coo	le) 10 East 53 rd St	reet,
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[X] Executive Officer	[] Director []	General and/or Managing Partner
Full Name (Last nam	ne first, if individual) Halk, Pamo	ela		
Business or Residen 22 nd Floor, New York	ce Address (Number and Street, NY 10022	et, City, State, Zip Coo	le) 10 East 53 rd St	reet,
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer		General and/or Managing Partner
Full Name (Last nam	ne first, if individual)			
Business or Residen	ce Address (Number and Stree	et, City, State, Zip Cod	le)	•
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer		General and/or Managing Partner
Full Name (Last nam	ne first, if individual)			
Business or Residen	ce Address (Number and Stree	et, City, State, Zip Coo	le)	
(Use blank sh	eet, or copy and use addition	aal copies of this she	et, as necessary.)
	B. INFORMATION AE	OUT OFFERING		
1. Has the issuer sol offering?	d, or does the issuer intend to	sell, to non-accredited	investors in this	Yes No
	Answer also in Appendix,			
2. What is the minim	um investment that will be acce	epted from any individ	ual?	
3. Does the offering	permit joint ownership of a sing	le unit?		Yes No [X] []
directly or indirectly, connection with sale	ion requested for each person any commission or similar rem s of securities in the offering. If broker or dealer registered witl	uneration for solicitation a person to be listed it	on of purchasers ir s an associated	

the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.

•												
Full N	ame (La	st name	first, if i	ndividua	al)							•
Busin	ess or R	esidenc	e Addre	ss (Num	ber and	Street, 0	City, Stat	e, Zip Co	ode)			•
Name	of Asso	ciated E	Broker or	Dealer								•
States	s in Whic	h Perso	n Listed	Has Sc	olicited or	r Intends	to Solici	it Purcha	sers			,
(Chec	ck "All	States"	or chec	k indiv	idual St	ates)				[] All St	ates
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full N	ame (La	st name	first, if i	ndividua	al)	_						,
Busin	ess or R	esidenc	e Addre	ss (Num	ber and	Street, 0	City, Stat	e, Zip Co	ode)			,
Name	of Asso	ciated E	Broker o	Dealer								_
States	s in Whic	h Perso	n Listed	Has Sc	licited or	r Intends	to Solici	it Purcha	sers			•
(Chec	ck "All	States"	or chec	k indiv	idual St	ates)				[] All St	ates
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full N	ame (La	st name	first, if i	ndividua	al)							r
Busin	ess or R	esidenc	e Addre	ss (Num	ber and	Street, 0	City, Stat	e, Zip Co	ode)			•
Name	of Asso	ciated E	Broker o	Dealer								1
States	s in Whic	h Perso	n Listed	Has Sc	licited o	r Intends	to Solici	it Purcha	sers			•
(Chec	ck "All	States"	or chec	k indiv	idual St	ates)	• • • • • • • • • • • • • • • • • • • •			[] All St	ates
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
												•

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box " and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.

Type of Security Debt Equity	Aggregate Offering Price \$ \$	Amount Already Sold \$\$
[] Common [] Preferred Convertible Securities (including warrants)	\$\$ \$ <u>15,000,000</u> \$ <u>15,000,000</u>	\$\$ \$\$ \$ <u>100,000</u> \$ <u>100,000</u>
Accredited Investors	Number Investors 1 -0-	Aggregate Dollar Amount of Purchases \$100,000 \$0\$
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.	,	
Type of offering Rule 505 Regulation A Rule 504 Total	Type of Security	Dollar Amount Sold \$ \$ \$

4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude

amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.

Transfer Agent's Fees	[]\$
Printing and Engraving Costs	[]\$
Legal Fees	[X] \$ <u>40,000</u>
Accounting Fees	[X] \$ <u>5,000</u>
Engineering Fees	[]\$
Sales Commissions (specify finders' fees separately)	[]\$
Other Expenses (identify) Blue Sky	[X] \$ <u>5,000</u>
Total	[X] \$ <u>50,000</u>

b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."

\$<u>14,950,000</u>

Payments to

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.

	Officers, Directors, & Affiliates	Payments
Salaries and fees	[] \$	[] \$
Purchase of real estate	[] \$	[] _ \$
Purchase, rental or leasing and installation of machinery and equipment	[] \$	[] \$
Construction or leasing of plant buildings and facilities	[] \$	[] \$
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	[]	[] \$
Repayment of indebtedness	[] \$	[] _\$
Working capital	[] \$	[X] \$ <u>1,950,000</u>
Other (specify): Creation of private equity investment funds	[] \$	[X] \$ <u>13,000,000</u>
	[] \$	[] \$
Column Totals	[] \$	[X] \$14,950,000
Total Payments Listed (column totals added)	[X] \$ <u>1</u> 4	1,950,000

n	FFD	FR	1 51	GNA	TURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under <u>Rule 505</u>, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type) Corinthian Holdings L.L.C.

Signature

Date

J-43

Name of Signer (Print or Type) Richard Calabrese

Title of Signer (Print or Type) President

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E. STATE SIGNATURE

1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?

Yes No

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239,500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Name of Signer (Print or Type) Richard Calabrese

Tile (Print on Type) President